



SOCIAL SECURITY BOARD SELF-EMPLOYED REGISTRATION FORM

INSTRUCTIONS

Please use block capitals. Proof of birth (i.e. birth certificate, passport) **must** be submitted. If name differs from that on birth certificate, proof of name change (i.e. deed poll, affidavit or marriage certificate.)

PERSONAL DATA						
SURNAME				MAIDEN NAME (if applicable)		
FIRST NAME		MIDDLE NAME		SEX		
MAILING ADDRESS				TELEPHONE NO. (S)		
PLACE OF BIRTH			BIRTH DATE	DAY	MONTH	YEAR
NATURE OF BUSINESS			OCCUPATION			
MARRIED	DATE OF MARRIAGE	SINGLE	DIVORCED	WIDOWED	NO. OF DEPENDANTS	

Mother's Name..... Spouse's Name.....

Father's Name..... Next of Kin

EMPLOYMENT DATA
COMPANY'S NAME (IF APPLICABLE)
PREVIOUS EMPLOYER (IF APPLICABLE)
SOCIAL SECURITY NUMBER (IF APPLICABLE)

Signature **Date**

FOR OFFICIAL USE ONLY		
ACTION TAKEN	INITIALS	DATE
INSURABILITY CONFIRMED		
INDEX SEARCHED		
NAME AND DATE OF BIRTH CHECKED		
SOCIAL SECURITY NO. ALLOTTED		
REGISTRATION CARD ISSUED		
DATE OF REGISTRATION		
COMMENTS		